PTO/SB/17 (10-08)
Approved for use through 06/30/2010. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Rec	red to re	respond to a collection of information unless it displays a valid OMB control number						
Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).				Complete if Known				
				Application Number		09/894,642-Conf. #1958		
FEE TRANSMITTAL				Filing Date		June 27, 2001		
For FY 2009				First Named Inventor		Kenneth H. Abbott		
				Examiner Name		J. M. Cloud		
Applicant claims small entity status. See 37 CFR 1.27				Art Unit	2444	1000		
TOTAL AMOUNT OF PAYMENT (\$) 180.00 Attorney Docket No. M1103.70784US00								
METHOD OF PAYMENT (check all that apply)								
Check X Credit Card Money Order None Other (please identify):								
Deposit Account Deposit Account Number: 23/2825 Deposit Account Name: Wolf, Greenfield & Sacks, P.C.								
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)								
Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee								
Charge any additional fee(s) or underpayments of								
fee(s) under 37 CFR 1.16 and 1.17								
FEE CALCULATION 1. BASIC FILING, SEARCH, AND EXAMINATION FEES								
I. BASIC FILING, SPARC		G FEES	SEA	RCH FEES	EXAM	INATION FEES	i	
Annthone . T		Small Entity		Small Entit	<u>Ε</u> ΩΩ (*	Small Entity	Food 5	Paid (\$)
Application Type	Fee (\$)		540	<u>Fee (\$)</u> 270	<u>Fee (\$</u> 220	5) <u>Fee (\$)</u> 110	<u>rees r</u>	<u>αια (φ)</u>
Utility	330 220	165 110	100	270 50	140	70		
Design Plant	220	110	330	165	170			
Reissue	330	165	540	270	650			
Provisional	220	110	0	0	0			
2. EXCESS CLAIM FEES		110	U	· ·	Ŭ	Ü		Small Entity
Fee Description	•						Fee (\$)	Fee (\$)
Each claim over 20 (inch							52	26
Each independent claim					220	110		
Multiple dependent claim						Bluitiula Danama	390 tant Claims	195
			Fee	ee Paid (\$)		Multiple Dependent Claims Fee (\$) Fee Paid (\$)		
- or HP = x = Fee (\$) Fee Paid (\$) HP = highest number of total claims paid for, if greater than 20.								
Indep. Claims Extra Claims Fee (\$) Fee Paid (\$)								
- or HP = X =								
HP = highest number of independent claims paid for, if greater than 3.								
3. APPLICATION SIZE FEE								
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50								
sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).								
<u>Total Sheets</u>	Extra Sheets			lditional 50 or			Fee	Paid (\$)
4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount)								
Other (e.g., late filing surcharge): 1806 Sulpinission of an Information Disclosure Statement 180.00								
SUBMITTED BY								
Signature	ille	16		Registration No. (Attorney/Agent)	32,95	Telephone	617.64	6.8000
Name (Print/Type) Edmund J. Walsh						Date	and The	2010
		Certificate of El	ectroni	ç Filing Under	37 CFR 1.8			
I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being transmitted via the Office electronic filing system in accordance with \$ 1.6(a)(4).								
1 10/120	70(1)	C !	oturo:	AM)""]	W	Ti.	Hany M	meining
Dated: Mur M 27,	1010	Signa	ature:	A LI Com	XHVV	("	1,	